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CONFIRMATION NO. 4089

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|--|---|--|--|--|------------------------------------|
| <b>SERIAL NUMBER</b><br>10/507,152   | <b>FILING OR 371(c)<br/>DATE</b><br>09/08/2004<br><b>RULE</b>   | <b>CLASS</b><br>415                    | <b>GROUP ART UNIT</b><br>3745  | <b>ATTORNEY<br/>DOCKET NO.</b><br>LYBZ 2 00083 |                                    |
| <b>APPLICANTS</b><br>Christian Beyer, Kkoln, GERMANY;<br>Heinz Englander, Linnich, GERMANY;<br>Peter-Laerbusch, Langerwehe, GERMANY;<br>Martin Laerbusch, Langerwehe, GERMANY;   |   |  |  |  |                                    |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/EP03/01602 02/18/2003  |   |  |  |  |                                    |
| <b>** FOREIGN APPLICATIONS *****</b><br>GERMANY 102 10 404.2 03/08/2002  |   |  |  |  |                                    |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u> |   | <b>STATE OR<br/>COUNTRY</b><br>GERMANY | <b>SHEETS<br/>DRAWING</b><br>3   | <b>TOTAL<br/>CLAIMS</b><br>12                  | <b>INDEPENDENT<br/>CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>Fay Sharpe Fagan Minnich & McKee<br>1100 Superior Avenue<br>Seventh Floor<br>Cleveland ,OH 44114-2518  |   |  |  |  |                                    |
| <b>TITLE</b><br>Method for producing the rotor of a drag vacuum pump and a rotor produced according to this method   |   |  |  |  |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>920  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                    |